

# Mental Health Data Entry

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# Road Map

- Definitions
- Basic data entry instructions
- Scenarios

**NOTE:** The supplemental materials provided with this presentation are required to fully understand certain concepts.

# What this is not

- I will not go over funding source information in this presentation
- I will not cover JCMS data entry extensively
  - Enough information to enter data consistently regardless of case management system

## Quick Reference Guide

	<i><b>Program</b></i>	<i><b>Service</b></i>	<i><b>Treatment</b></i>
<i><b>Definitions</b></i>	<ul style="list-style-type: none"> <li>▪ Planned or coordinated activity or group of activities</li> <li>▪ Addresses a specific purpose or goal</li> <li>▪ Has a curriculum and follows a strategy or plan</li> <li>▪ Goals include altering a juvenile's behavior</li> <li>▪ Participation required/tied to supervision</li> </ul>	<ul style="list-style-type: none"> <li>▪ Typically a one-time event</li> <li>▪ Meets a juvenile's immediate or pressing needs</li> <li>▪ No curriculum or long-term strategy</li> <li>▪ Provides assistance or support</li> <li>▪ Does not have to be required/tied to supervision</li> </ul>	<ul style="list-style-type: none"> <li>▪ Used to track BH interventions</li> <li>▪ Focuses on the well-being of the juvenile</li> <li>▪ Occurs over time but has no curriculum</li> <li>▪ Intended to remedy a BH problem</li> <li>▪ Participation not required by JPD</li> </ul>
<i><b>Examples</b></i>	<ul style="list-style-type: none"> <li>• Substance abuse education</li> <li>• Anger management</li> <li>• Counseling</li> <li>• Sex offender</li> <li>• Parenting skills training</li> </ul>	<ul style="list-style-type: none"> <li>• Medical appointments</li> <li>• Assessments and psychological testing</li> <li>• Single session crisis intervention</li> <li>• Educational testing</li> <li>• Transportation</li> </ul>	<ul style="list-style-type: none"> <li>• Medication management</li> <li>• Skills training</li> <li>• Multiple session crisis intervention</li> <li>• Case management</li> </ul>

# Behavioral Health Service

- Provide help, assistance, or support to youth with suspected or confirmed behavioral health need
- One-time event
- Not associated with a program
- Captured in the Behavioral Health screen

# Behavioral Health Service Examples

- Screenings
- Doctor visits
  - Excluding visits related to physical sickness or issues
- Crisis intervention
  - Emergency psychological care aimed at stabilizing youth and families in crisis
  - One-time occurrence
- Assessments
- Psychotropic medication
- Single counseling sessions
  - If the session is part of a long-term program, you do not need to enter each individual session

# Assessment vs. Screener

- **Screener:** process for evaluating the *possible* presence of a particular problem and the outcome is typically a simple yes or no
- **Assessment:** process for defining the nature of that problem, determining a diagnosis, and developing specific treatment recommendations for addressing the problem or diagnosis

# Assessment vs. Screener

- Screener is used to determine *if* a full assessment is warranted
- Screeners typically require little or no special training to administer
- An assessment typically gathers detailed information for a treatment plan



# Behavioral Health Service Data Fields

- **BH Referral Date:** The date youth was referred for the behavioral health service
- **Presenting Problem:** Why you referred the youth for a behavioral health service
  - E.g. Intellectual disability, mental health, substance abuse, trauma
- **Service Type:** The behavioral health service for which the youth was referred
  - E.g. Assessment, doctor visit, evaluation, screening, medication
- **Referred To:** Specific clinician or location providing the service
- **Referral Outcome:** Outcome of the behavioral health service
- **Location:** Where the service occurred
- **BH Service Date:** The date the service was actually rendered

# Behavioral Health Treatment

- Care intended for or used to remedy a behavioral health problem
- Occurs over time
- Does NOT have a curriculum
- Does NOT have to be result of a referral from the juvenile probation department
- Captured in the Behavioral Health screen

# Behavioral Health Treatment Examples

- Medication management
  - Should include monitoring of at least one behavioral health related prescription
- Crisis intervention
  - If lasting longer than one day
- Skills training
  - Rehabilitative interventions to reduce cognitive and behavioral impairments
    - E.g. basic living and self-care skills, communication skills, transitional living skills
- Case management
  - Coordination of community services and care for mental health, intellectual disability, trauma, or substance abuse patients

# Community-Based Mental Health Programs

- Primary purpose is to address mental health needs of the youth
- Examples include:
  - Cognitive Behavioral Therapy (CBT)
  - Counseling
  - Mental Health Court

# Mental Health Needs Criteria

- Mental illness diagnosis
- Serious emotional, behavioral, or mental disorders
- Current suicide attempt or suicidal ideations
- Caution or Warning on *subsequent* MAYSI-II or other screener

# Mental Health Needs Criteria

- Youth receives mental health flag on the *full* PACT assessment, Mental Health Domain
- Youth is currently receiving mental health treatment
- Youth is currently taking psychotropic medication
- Youth was exposed to a trauma and is currently experiencing mental health symptoms
- Youth has a history of mental health needs but is not currently symptomatic or in need of treatment

# Indicator #11

- Intended to notify probation officers of a youth's mental health history as it may factor into a youth's outcomes and programming needs
- This should **only** be used if the youth previously met a criteria for an immediate mental health need and has since been stabilized
- This should be updated to reflect **current** mental health needs if the youth meets a more immediate requirement, such as suicidal ideations

# Entering Mental Health Needs

- **BEFORE ENTERING ANYTHING**: review the Mental Health Needs definition sheet
- If the youth does not or has never met any of the mental health needs criteria, Mental Health Needs should be “No”
- If the youth meets one or more of the mental health needs criteria, Mental Health Needs should be “Yes”
- If you suspect the youth has mental health needs but do not have enough information to definitively answer “Yes” or “No”, Mental Health Needs should be “Unknown”



## If Mental Health Needs is “No” or “Unknown”

- Continue to monitor the youth for changes in their mental well-being
- If you suspect the youth has mental health needs:
  - Refer the youth to a licensed clinician for assessment and indicate “Unknown” mental health needs
  - This is the only time it is appropriate to use “Unknown”
  - This should be updated to either “Yes” or “No” as soon as enough information is gathered to make a decision

# If Mental Health Needs is “Yes”

- Choose the primary reason you determined the youth to have mental health needs based on the Mental Health Needs definition
- Indicate how you obtained the information
  - **Parent:** parent verbalized the youth met one of the Mental Health Need definition criteria
  - **Youth:** youth verbalized he/she met one of the Mental Health Need definition criteria
  - **Clinician:** Youth received a psychological assessment from a licensed clinician and received a diagnosis *or* is indicated as having another “factor important for consideration”
  - **Screeners/Assessment:** This should *only* be used if the primary indicator refers to the MAYSI or PACT criteria
- Indicate the date the youth’s mental health needs were identified
  - This should be updated to reflect the most recent identification if the needs change

# Entering Mental Health Needs

- If the youth, at intake:
  - Does not meet any requirements, or meets one requirement (e.g. Caution MAYSI-II)
  - But is later given a diagnosis or meets a more immediate need requirement (e.g. suicidal)
  - The screen should be updated to reflect the new primary reason and the date the new need was identified
- The purpose of this screen is to reflect the youth's *current* state of well-being

# Entering Diagnosis Information

**Update:** Only enter diagnosis information on the psychological test screen

- The new diagnosis list includes three things:
  - ICD 9 diagnostic code (DSM-IV)
  - ICD 10 diagnostic code (DSM-5)
  - Diagnostic description
- Choose the primary diagnosis provided by the licensed clinician
  - If the youth received multiple diagnoses, indicate each in the appropriate fields
- Update regularly based on most recent psychological test
  - If the clinician indicates the youth is in remission or the diagnosis is no longer valid, indicate the youth has either no diagnosis, or the diagnosis is in remission

**Note:** The expectation is that all psychological tests are also entered in the Behavioral Health Service Screen.

# Diagnosis vs. Other Conditions

- Diagnosis: meets the clinical requirements for a disorder
  - E.g. Depression versus feeling sad
- Other conditions that may be a focus of clinical attention ***are not*** mental disorders
  - Used to call attention to a problem that is either unrelated to a mental disorder or is significant enough to require special attention
    - E.g. childhood physical abuse or extreme poverty

# NOW FOR THE FUN STUFF!



# Rules for the Game

- Your table = your team
- Use the provided letter paddles to indicate your tables' response
- We're all adults here, I'm trusting you to keep honest record of your correct answers
- Bonus point questions will require verbalization
  - If you have a response, select a representative from your table to raise their hand and provide the answer
  - The table to raise their hand **FIRST** will be chosen for bonus points
  - If you answer incorrectly, we will have a second round of hand raising
- Most importantly, this is supposed to be **FUN**, so please participate... There will be prizes (and bragging rights)!!